Attorney Docks No.: PALM-3556.SG

2682



THE UNITED STATES PATENT AND TRADEMARK OFFICE

I hereby of bearing F of deposit	īrst Class P	his trai Postage	nsmittal of the below des e and addressed to the C	cribed docume Commissioner f	ent is being de or Patents P.	O. Box 1450,	Alexandria	, VA 223	estal Service 13-1450, or	e in an envelop n the below da	pe te
Date of Deposit:	07/22/	'04	Name of Person Making the Deposit:	KATHERINE	RINALDI	Signature of Making the		n Kal	kusy	ne Ren	all.
In re Ap	plication	of: F	Rich Gioscia and M	asamichi U	dagawa		•	'		,	_ ,
Applica	ition No.	:	09/855,250	E	Examiner:	Behulu,	Alema	yehu			
Filed:	05/14/	/01		,	Art Unit: 2	682					
Confirm	nation No	o.: 90)14								
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	ssioner f	for Pa	atents						RE	ECEI	VED
P.O. Box 1450 Alexandria, VA 22313-1450 AMENDMENT TRANSMITTAL									AUG 0 2 7		
1.	Transm	itted	herewith is an am	endment fo	r this appli	cation			Techr	nology Ce	nter 2600
Transmitted herewith is a response to an office action for the above identified patent application. (45 sheets) Transmitted herewith are sheets of substitute formal drawings. Other: Applicant is other than a small entity											
Extension of Term											
3.	The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.										
(a)	[] Applicant petitions for an extension of time under 37 C.F.R. 1.136 (fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)										
			Extension [] one month [] two months [] three mont [] four month	hs	\$4 \$9 \$1	10.00 20.00 50.00 ,480.00					
					<u>Fe</u>	ee \$					
If an ad	Iditional	exter	nsion of time is req	uired, pleas	se conside	r this a pe	tition the	erefor.			
(b)	[X]	bein	licant believes tha g made to provide d for a petition for	for the pos	ssibility tha						

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Fee Calculation

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(for other than a small entity)											
Fee Items	Claims Remaining After Amendment	Highest Number of Claims Previously Paid For	Present Extra Claims	Fee Rate	Total						
Total Claims	34	- 34 =	0	x \$18.00	\$0.00						
Independent Claims	4	- 4 =	0	x \$86.00	\$0.00						
Multiple Dependent Claim Fee (one or more, first added by this \$290.00 amendment)											
Total Fees											

PAYMENT OF FEES

AUG 0 2 2004

5. The full fee due in connection with this communication is provided as follows:

Technology Center 2600

- [x] The Commissioner is hereby authorized to charge any additional fees associated with this communication or credit any overpayment to Deposit Account No.: 23-0085.

 A duplicate copy of this authorization is enclosed.
- [] A check in the amount of §
- [] Charge any fees required or credit any overpayments associated with this filing to Deposit Account No.: 23-0085.

Please direct all correspondence concerning the above-identified application to the following address:

WAGNER, MURABITO & HAO LLP

Two North Market Street, Third Floor San Jose, California 95113 (408) 938-9060 Customer No: 45549

Respectfully submitted,

Date: 27 July 2004

Matthew J. Blecher Reg. No. 46,558